



TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/855,153
		Filing Date	May 14, 2001
		First Named Inventor	Reiter, Robert E.
		Art Unit	1642
		Examiner Name	Helms, Larry Ronald
Total Number of Pages in This Submission		Attorney Docket Number	02307K-141582US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Part B - Fee(s) Transmittal x2 <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment After Allowance Pursuant to 37 C.F.R. § 1.312 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Townsend and Townsend and Crew LLP Annette S. Parent Reg. No. 42,058	
Signature	<i>Annette S. Parent</i>	
Date	5/24/03	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Karen Karlin		
Signature	<i>Karen Karlin</i>	Date	5-25-04